

HIPAA Administrative Simplification  
External Code Sets  
DRAFT

3/4/02

1 of 13

Code Set	International Classification of Diseases, 9th edition, Clinical Modification, (ICD-9-CM), Volumes 1 and 2	Current Procedural Terminology (CPT-5)	The Code on Dental Procedures and Nomenclature (CDT)	International Classification of Diseases, 9th edition, Clinical Modification (ICD-9-CM), Volume 3 procedures	Health Care Financing Administration Common Procedure Coding System (Level II of HCPCS)	National Drug Codes (NDC)	National Uniform Billing Committee (NUBC) codes	National Uniform Claims Committee (NUCC)
Purpose, Usage Description	Diagnosis coding of diseases, injuries, impairments, other health related problems, their manifestations, and causes of injury, disease, impairment, or other health-related problems.	Professional services and outpatient services  The CPT <sup>o</sup> was developed by the American Medical Association (AMA) in 1966. CPT is a registered trademark of the AMA. Each year, an annual publication is prepared, that makes changes corresponding with significant updates in medical technology and practice. The most recent version of CPT, <i>CPT 2002</i> , contains 8,107 codes and descriptors.	Dental services  The American Dental Association (ADA) was founded in 1859 in New York by 26 dentists representing various dental societies. Today, the ADA has more than 141,000 members and 529 local dental societies.	Inpatient hospital services  In 1985, the ICD-9-CM Coordination and Maintenance Committee was formed, a federal interdepartmental committee, co-chaired by the National Center for Health Statistics (NCHS) and CMS (formerly HCFA) charged with maintaining and updating the ICD-9-CM system. The committee is jointly responsible for approving coding changes and developing errata, addenda, for any new developed procedures, technologies & diseases.	Supplies, equipment and other health-related services used in health care services	Drugs; Biologics  Note: Biologics, in contrast to drugs that are chemically synthesized, are derived from living sources (humans, animals and microorganisms). Many biologics are manufactured using biotechnology and represent the cutting edge of of biomedical research.	The NUBC was formed by the American Hospital Association in 1975 and includes all major national provider and payer organizations. Specifically, NUBC represents institutional and other selected providers for Medicare Part A (note: the NUCC parallel's the NUBC for the non-institutional health care community). The NUBC was formed to develop a single billing form and standard data set that could be used nationwide by the institutional providers and payers for health care claims.	The goal of the NUCC is to promote the development of a uniform electronic claim "form" for use by the non-institutional health care community to transmit related claim and encounter information to and from all third-party payers (Medicare Part B)
Maintenance Organization Contact Information	U.S. Department of Health and Human Services (NCHS) National Center for Health Statistics	American Medical Association Richard F. Corlin, MD President 515 N. State Street	American Dental Association (ADA) D. Gregory Chadwick,	U.S. Department of Health and Human Services (HCFA) now CMS. Note: the NCHS has the lead	U.S. Department of Health and Human Services (HCFA, BCBSA, HIAA)	U.S. Department of Health and Human Services (FDA), in collaboration with drug	George Arges Chairman, NUBC American Hospital Association One North Franklin Chicago, IL 60606	The AMA chair's the NUCC (has tie-breaking vote) in consultation with CMS

HIPAA Administrative Simplification  
External Code Sets  
**DRAFT**

3/4/02  
☐

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		Chicago, IL 60610 312-464-5000  The American Medical Association (AMA) is the nation's leader in promoting professionalism in medicine and setting standards for medical education, practice, and ethics.  <i>The AMA's CPT® Coding Helpline 800-634-6922</i>	D.D.S. <i>President</i>	responsibility for ICD-9-CM diagnosis codes included in the Tabular List and Alphabetic Index for Diseases, while CMS has lead responsibility for the ICD-9-CM procedure codes included in the Tabular List and Alphabetic Index for Procedures.		manufacturers  Note: The FDA regulates foods, drugs, biologics (blood supply), cosmetics, electronic products (radiation), and medical devices.  The Center for Biologics Evaluation and Research (CBER) regulates biological products. FDA public affairs specialists are located throughout the country. The list of contacts is indicated on the FDA Website. Also, FDA toll free hotline: 1-888-INFO-FDA	Phone: (312) 422-3398 Fax: (312) 422-4583	<a href="http://www.nucc.org/">http://www.nucc.org/</a>
Who are the People Making Update Decisions	Final decisions made by NCHS Director in December.	CPT Advisory Committee and the Editorial Panel. The CPT Editorial	Council on Dental Benefit Programs at 312-440-2753.	Donna Pickett, Co-Chairperson; ICD-9-CM Coordination and Maintenance	HCPCS National Panel for review: - HCFA - BCBSA	Randy Levin, Center for Drug Evaluation and Research	Todd Omundson (Alternate) Associate Director, Health Data Management Group	The AMA through its designees chairs the NUCC. The AMA produces agendas,

HIPAA Administrative Simplification  
External Code Sets  
**DRAFT**

3/4/02

3 of 13

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		Panel is responsible for maintaining CPT. This Panel is authorized to revise, update, or modify <i>CPT</i> . The Panel is comprised up of 16 members, 11 nominated by the AMA and 1 each from the Blue Cross and Blue Shield Association, the Health Insurance Association of America, HCFA, the American Hospital Association, and the co-chair of the Health Care Professionals Advisory Committee (HCPAC). AMA's Board of Trustees appoints the Panel members. Of the 11 AMA seats on the Panel, 8 are regular seats, having a maximum tenure of two 4-	The Council on Dental Benefit Programs staff provide continuing support to dentists and their staff on questions concerning the code. For more information, contact them at <a href="mailto:dentalcode@ada.org">dentalcode@ada.org</a> .	Committee; NCHS; Room 1100; 6525 Belcrest Road; Hyattsville, MD 20782. Comments may be sent by E-mail to: <a href="mailto:dfp4@cdc.gov">dfp4@cdc.gov</a> . Questions and comments concerning the procedure codes should be addressed to: Patricia E. Brooks, Co-Chairperson; ICD-9-CM Coordination and Maintenance Committee; CMS, Center for Medicare Management, Purchasing Policy Group, Division of Acute Care; C4-08-06; 7500 Security Boulevard; Baltimore, MD 21244-1850. Comments may be sent by E-mail to: <a href="mailto:pbrooks@hcfa.gov">pbrooks@hcfa.gov</a> .	- HIAA	Food and Drug Administration, 1451 Rockville Pike, Rockville, MD 20857, 301-594-5400;  Robert Yetter, Center for Biologics Evaluation and Research Food and Drug Administration, 1401 Rockville Pike, Rockville, MD 20852, 301-827-0373.	American Hospital Association One North Franklin Chicago, IL 60606 Phone: (312) 422-3397 Fax: (312) 422-4583 <a href="mailto:tomunds1@aha.org">tomunds1@aha.org</a>	external communications with other member organizations and general administrative support.

HIPAA Administrative Simplification  
External Code Sets  
**DRAFT**

3/4/02

4 of 13

Code Set	International Classification of Diseases, 9th edition, Clinical Modification, (ICD-9-CM), Volumes 1 and 2	Current Procedural Terminology (CPT-5)	The Code on Dental Procedures and Nomenclature (CDT)	International Classification of Diseases, 9th edition, Clinical Modification (ICD-9-CM), Volume 3 procedures	Health Care Financing Administration Common Procedure Coding System (Level II of HCPCS)	National Drug Codes (NDC)	National Uniform Billing Committee (NUBC) codes	National Uniform Claims Committee (NUCC)
		<p>year terms, or a total of 8 years for any individual. The 5 remaining seats, called rotating seats, have two 2-year terms. These rotating seats allow for more multidisciplinary input.</p> <p>In April 2001, the AMA announced that the Department of Health and Human Services selected CPT as the standard code set for reporting health care services in electronic transactions when it published its Final Rule (part of the HIPAA requirements)</p> <p>The <i>Final Rule</i> names CPT (codes and modifiers) and the Health Care</p>						

HIPAA Administrative Simplification  
External Code Sets  
**DRAFT**

3/4/02

5 of 13

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		Financing Administration Common Procedural Coding System as the procedure code set for: +Physician services +Physical and occupational therapy services +Radiological procedures +Clinical laboratory tests +Other medical diagnostic procedures +Hearing and vision services +Transportation services including ambulance						
How is a add/change request submitted	Refer to <a href="http://www.cdc.gov/nchs/products/catalogs/subject/icd/icd96ed.htm">http://www.cdc.gov/nchs/products/catalogs/subject/icd/icd96ed.htm</a> .	To request the addition of a new code or change an existing CPT code, go to <a href="#">Applying for CPT Codes</a> via the AMA Web Site (has direct link) for all the information on submitting		The Committee holds public meetings twice a year to discuss proposed coding changes. The Committee makes recommendations from the meetings to be approved at	Info online at <a href="http://www.hcfa.gov/medicare/03info/web.rtf">www.hcfa.gov/medicare/03info/web.rtf</a> .	<a href="http://www.fda.gov">http://www.fda.gov</a>	The NUBC holds meetings and conference calls throughout the year and change requests may be submitted at any time.	Change requests must be submitted in writing in the format developed by the NUCC to the NUCC chair or secretary. The NUCC provides an official Change Request Form for use by the public to request changes to the data set. The form

**HIPAA Administrative Simplification  
External Code Sets  
DRAFT**

3/4/02

6 of 13

Code Set	International Classification of Diseases, 9th edition, Clinical Modification, (ICD-9-CM), Volumes 1 and 2	Current Procedural Terminology (CPT-5)	The Code on Dental Procedures and Nomenclature (CDT)	International Classification of Diseases, 9th edition, Clinical Modification (ICD-9-CM), Volume 3 procedures	Health Care Financing Administration Common Procedure Coding System (Level II of HCPCS)	National Drug Codes (NDC)	National Uniform Billing Committee (NUBC) codes	National Uniform Claims Committee (NUCC)
		proposals to the CPT Editorial Panel.		the agency level.				is available on the web site. The requester may submit an electronic request directly via the Web Site.
How long does it take to process an add/change request	Difficult to estimate but probably about 18 months.	Difficult to estimate per e-mail dated 7/19/01 but probably about 18 months.		Up to 18 months.	Estimated time – 6 months.	FDA gathers public comments through two channels: proposed rules and petitions. An announcement is placed in the Federal Register (published daily). 60-day comment period ensues. Weekends and holidays are included in the comment period. FDA also schedules public meetings and hearings to discuss its proposals. These are held in Washington, D.C. and are announced in the Federal Register.	In order to be considered at the next scheduled meeting, requests for changes to the UB-92 Manual or the UB-92 Data Set must be received by the NUBC Secretary at least 45 days in advance.	The NUCC Central Web Site for HIPAA change requests is where requests are received and assigned an inventory control number. Notification is sent to all the SDOs and DCC that a request has been received. Each SDO and DCC has 10 business days from the date of notification to respond as to whether they want to participate in the development of a recommendation for the request.
How long to implement changes	Minimum of 20 months.	Minimum of 20 months.		Minimum of 20 months.	Minimum of 20 months.	FDA management makes decisions	Approved changes are usually effective as of April 1, October 1, or	NUCC Data Subcommittee designed sends response of the

**HIPAA Administrative Simplification  
External Code Sets  
DRAFT**

3/4/02

7 of 13

Code Set	International Classification of Diseases, 9th edition, Clinical Modification, (ICD-9-CM), Volumes 1 and 2	Current Procedural Terminology (CPT-5)	The Code on Dental Procedures and Nomenclature (CDT)	International Classification of Diseases, 9th edition, Clinical Modification (ICD-9-CM), Volume 3 procedures	Health Care Financing Administration Common Procedure Coding System (Level II of HCPCS)	National Drug Codes (NDC)	National Uniform Billing Committee (NUBC) codes	National Uniform Claims Committee (NUCC)
						after agency staff complete an evaluation, a process which may take several weeks to more than a year, depending on the issue's complexity.	about 90 days after approval.	committee to Central Web site and logs in decision. If NUCC elects to develop a recommendation a 90 day process ensues and is noted on the NUCC "Change Request" page. Full committee review of the recommendation must take place and be prepared for the next meeting.
Frequency of Updates	Biannually	Annually.  For federal programs, January 1 of each year is generally the effective date for using the new CPT codes. The AMA prepares each annual update so that it is available in the late fall of each year preceding its implementation. However, other third party payors may not implement the new codes on the same date. Therefore, it is	Annually (this hasn't been determined yet – they have been on an every 5 year release schedule – with 2000 being the most recent)	The ICD-9-CM is updated annually, effective October 1 <sup>st</sup> of each year as part of the update to the hospital inpatient prospective payment system.	Annually (temporary codes are published on web site regularly).	Continuous. Also, refer to the National Drug Code (NDC) Directory. The Internet NDC Directory is updated quarterly. The Directory contains 4 tables that list descriptors and codes describing the data, including dosage forms, routes of administration, unit codes and drug class. Internet e-mail: <a href="mailto:drugprolducts@c">drugprolducts@c</a>		The NUCC conducts semi-annual meetings with the public welcome to attend.  Meeting agendas are posted on the web site.

**HIPAA Administrative Simplification**  
**External Code Sets**  
**DRAFT**

3/4/02

8 of 13

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		recommended to consult with each payer or other source to determine when to begin using the new codes.				<a href="http://der.fda.gov">der.fda.gov</a>		
Cut-off to request updates	May/November	January, April, July, October (these are the deadlines for submission for each of the meetings – there is an annual cut-off in January for the following year’s codes)	October	April/December for 2002 (On November 1-2, 2001 ICD-9-CM Coordination and Maintenance Committee meeting on code revisions for potential implementation on October 1, 2002)	April	N/A – Updates are continuous but only published March, June, September, and December on website		
How to Request Code Updates	By submitting recommendations for modification prior to a scheduled meeting.	By submitting recommendations in writing.	Requests may be submitted on-line or in writing at any point prior to the annual cut-off date. Note: the Code on Dental Procedures and Nomenclature is printed in the ADA publication titled cdt-3/version2000, which is	By submitting recommendations in writing for modification prior to a scheduled meeting.	By submitting requests in writing	Done by manufacturers after FDA approval	Request for changes must include nine items of documentation: 1. Describe “action” and proposed implementation date; 2. Brief, non-technical description of the issue; 3. Provide information on the “cause” of the proposed change; 4. What the change is intended to accomplish; 5. Demonstrate national issue;	



HIPAA Administrative Simplification  
External Code Sets  
**DRAFT**

3/4/02

9 of 13

Code Set	International Classification of Diseases, 9th edition, Clinical Modification, (ICD-9-CM), Volumes 1 and 2	Current Procedural Terminology (CPT-5)	The Code on Dental Procedures and Nomenclature (CDT)	International Classification of Diseases, 9th edition, Clinical Modification (ICD-9-CM), Volume 3 procedures	Health Care Financing Administration Common Procedure Coding System (Level II of HCPCS)	National Drug Codes (NDC)	National Uniform Billing Committee (NUBC) codes	National Uniform Claims Committee (NUCC)
			available for purchase from the ADA. Codes are not available on-line. You can order a copy by calling 1-800-947-4746				6. Proposal presented to SUBC 7. Why existing codes are insufficient; 8. Impact on providers; 9. Any documentation that reinforces national need for proposed change.	
Are Temporary Codes Available	No	Yes, CPT Category III codes for emerging technology and tracking quality measures	No	No	Yes, “S” codes for third party payers and G, K and Q codes for Medicare	No, codes can only be issued after drug has received FDA approval		
How Long Can Temporary Codes Be Used	Refer to above web site.	5 years, but may be extended if they still serve a purpose not appropriate for category 1 codes	Until discontinued	Until discontinued	Until discontinued	N/A		
When are they available	Published in Federal Register at end of May	Annually in early October (a few codes were released mid-year 2000 and that practice may continue)	In the fall of the year preceding effective date for new codes	Usually coincides with the ICD-9-CM Federal Register release as mandated by Public Law 99-509. (On October 1, 2001 new and revised ICD-9-CM go into effect along with other DRG changes)	Annually, in early October	Continuous (published quarterly)		

# HIPAA Administrative Simplification External Code Sets DRAFT

3/4/02

10 of 13

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How are they published	Federal Register/book	The CPT Book	Book	HCFA website/book  Updated ICD-9-CM available on CD Rom through the Government Printing Office at (202) 512-1800. Order number 017-022-01499-8 for ICD-9-CM version in effect from October 2, 2000 through September 30, 2001 Costs \$18	Book	Website/book  The Federal Register is available at many public libraries, colleges or may be viewed on the FDA Website as noted below.		
Web Site	<a href="http://www.cdc.gov/nchswww/about/otheract/icd9/maint/maint.htm">http://www.cdc.gov/nchswww/about/otheract/icd9/maint/maint.htm</a>	<a href="http://www.ama-assn.org/med-sci/cpt/coding.htm">http://www.ama-assn.org/med-sci/cpt/coding.htm</a>	<a href="http://www.ada.org/index.html">http://www.ada.org/index.html</a>	<a href="http://www.hcfa.gov/medicare/icd9cm.htm">http://www.hcfa.gov/medicare/icd9cm.htm</a>	<a href="http://www.hcfa.gov/medicare/hcpcs.htm">http://www.hcfa.gov/medicare/hcpcs.htm</a>	<a href="http://www.fda.gov/cder/ndc/index.htm">http://www.fda.gov/cder/ndc/index.htm</a>  <a href="http://www.fda.gov/cber">http://www.fda.gov/cber</a>	<a href="http://www.nubc.org/change.html">www.nubc.org/change.html</a>	<a href="http://www.nucc.org/">www.nucc.org/</a>
Where can the standard be purchased (or accessed)	Govt. printing office. CDC/FTP server.	Through the AMA.	From the ADA directly.	Updated ICD-9-CM available on CD Rom through the Government Printing Office at (202) 512-1800. Order number 017-022-01499-8 for ICD-9-CM version in effect from October 2, 2000 through September	Downloaded at <a href="http://www.hcfa.gov/stats/ufiles.htm#alphanu">www.hcfa.gov/stats/ufiles.htm#alphanu</a> .	Available on-line:  <a href="http://www.fda.gov/cder/drls/default.htm">http://www.fda.gov/cder/drls/default.htm</a>  Click on Annex A – Code of federal regulations.		Forms & Instructions used by non-institutional providers to bill Medicare Part B services & Medicaid services can be obtained via the Medicaid state agency as follows: <b>California</b> 1-800-952-5253--Medi-Cal Fair Hearings (English/Spanish) 1-800-BABY-999 (1-

HIPAA Administrative Simplification  
External Code Sets  
DRAFT

3/4/02

11 of 13

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				30, 2001 Costs \$18				800-222-9999)— BABYCAL and AIM (In-State and Common Border States ; English/Spanish) 1-800-322-6384— DENTICAL(In-State and Common Border States; English/Spanish) 1-800-822-6222— Provider and Beneficiary Fraud Statewide California; English/Spanish/Vietnam ese/Russian 1-800-722-0432--State Attorney General's Office Medi-Cal Fraud and Patient Abuse (In- State Only; English) 1-888-452-8609— Managed Care Ombudsman's Complaint Line (English/Spanish) 1-800-400-0815— Department of Managed Health Care – Complaint line regarding health plans (English – Translation services via conference call) 1-888-747-1222--Medi- Cal for Children and Healthy Families General Information and Medi-

HIPAA Administrative Simplification  
 External Code Sets  
 DRAFT

3/4/02

12 of 13

Code Set	International Classification of Diseases, 9th edition, Clinical Modification, (ICD-9-CM), Volumes 1 and 2	Current Procedural Terminology (CPT-5)	The Code on Dental Procedures and Nomenclature (CDT)	International Classification of Diseases, 9th edition, Clinical Modification (ICD-9-CM), Volume 3 procedures	Health Care Financing Administration Common Procedure Coding System (Level II of HCPCS)	National Drug Codes (NDC)	National Uniform Billing Committee (NUBC) codes	National Uniform Claims Committee (NUCC)
								Cal for Children and Pregnant Women's MailIn Application Assistance (English,Spanish,Armenian,Cambodian,Cantonese ,Hmong,Russian,Farsi,Vietnamese,Korean) 1-800-880-5305— Healthy Families Program (English, Spanish, Armenian, Cambodian, Cantonese, Hmong, Russian, Farsi, Vietnamese, Korean) 1-800-952-5294--Other Health Coverage/Medicare Buy-In
How much does it cost	You can download free.	\$49.95		.\$18.00	You can download free.	Free – online.	Forms are available on-line as listed below	Forms are available on-line as listed below
What media is available		For coding change request forms to introduce new procedures or to delete or revise procedure codes already in the <i>CPT</i> book are available upon request from:  CPT Editorial Research and Development American Medical Association		In July 2001, HCFA became the Centers for Medicare & Medicaid Services (CMS) which changed the prefix of form numbers.  Visit: <a href="http://www.hcfa.gov/forms">www.hcfa.gov/forms</a>  Final decisions on		<a href="http://www.fda.gov/opacom/backgrounders/voice.html">http://www.fda.gov/opacom/backgrounders/voice.html</a>	<a href="http://www.hcfa.gov/medicare/edi/edi5.htm#Form%20CMS-1450">http://www.hcfa.gov/medicare/edi/edi5.htm#Form%20CMS-1450</a>  Form CMS-1450 (UB-92)  <a href="http://www.hcfa.gov/medicare/edi/h1450.pdf">http://www.hcfa.gov/medicare/edi/h1450.pdf</a>	<a href="http://www.hcfa.gov/medicare/edi/edi5.htm">http://www.hcfa.gov/medicare/edi/edi5.htm</a>  Form CMS-1500: <a href="http://www.hcfa.gov/medicare/edi/1500-90.pdf">http://www.hcfa.gov/medicare/edi/1500-90.pdf</a>

HIPAA Administrative Simplification  
External Code Sets  
**DRAFT**

3/4/02

13 of 13

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		Medical Association 515 North State Street Chicago, IL 60610 312-464-4723		all ICD-9-CM code titles as well as proposed revisions to the DRG system can be accessed at: <a href="http://www.hcfa.gov/medicare/ippsmain.htm">www.hcfa.gov/medicare/ippsmain.htm</a>				